

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION | 1/W | | 10/24/01 |
| O.I.P.E. CLASSIFIER | <i>[Signature]</i> | 32 | 11/6/01 |
| FORMALITY REVIEW | 1 | 926 | 11/21/01 |
| RESPONSE FORMALITY REVIEW | | | |

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INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

11/21/01

Additional sheet here